

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
1	/						
2	/						
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50	/						
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							

TOTAL IND:

12

TOTAL DEP:

41

TOTAL CLAIMS

53